



Colorado Department of Public Health and Environment
EXPENDITURE DETAILS for REIMBURSEMENT INVOICE FORM

<https://www.colorado.gov/pacific/cdphe/standardized-invoice-form-and-links>

Invoice #	082015 (EXT NEEDED)
FEIN	846000804
Purchase Order/ Encumbrance #	
Payment Option	<input type="radio"/> EFT/Direct Deposit - Must be set up* <input checked="" type="radio"/> Mail Reimbursement Check to Remit Address

Organization Name	San Juan County	
Invoice Period	08/05/15	8/31/2015
Final Invoice		

To:	Colorado Dept of Public Health and Environment	From:	San Juan County
CDPHE Program:		Contact Name:	William A. Tookey
CDPHE Contact:		Remit Address:	PO Box 365
Mail Code:			
Address:	4300 Cherry Creek Drive South		
City:	Denver	City:	Silverton
State:	CO	State:	CO
Zip Code:	80246	Zip Code:	81433
Fax:		Fax:	970-387-5671
Telephone:		Telephone:	970-387-5766
Email:		Email:	

Expenditure Categories				Match or In-Kind (If Applicable)	Total Amount Requested from CDPHE
Personal Services	Gross Earnings for invoice period	Fringe	Percent of Actual Time on Contract/ Purchase Order		

CBI/Ex. 4

Totals - This line shows total salary / fringe with the % applied	\$ 45,485.26	\$0.00		
	Total Personal Services (including fringe benefits)		\$0.00	\$45,485.26

Supplies & Operating Expenses	
CR 110 Repairs	
Equipment	\$10,288.00
Fuel	\$1,760.55
Culvert	\$4,720.00
Total Supplies & Operating Expenses	\$16,768.55
Travel	

Other Costs		
Total Other Costs	\$0.00	\$0.00
Contractual (payments to third parties or entities)		

CBI/Ex. 4

Total Contractual	\$0.00	\$44,172.62
SUB-TOTAL BEFORE INDIRECT	\$0.00	\$108,001.01
Indirect		
Total Indirect	\$0.00	\$0.00
TOTAL MATCH OR IN KIND	\$0.00	
TOTAL THIS INVOICE		\$108,001.01

Billing Summary	
Contract or Purchase Order Budget Amount	
Cumulative Amount Previously Invoiced	
Amount of this Invoice	\$108,001.01
Total Invoiced to Date	\$108,001.01
Budget Amount Remaining	(\$108,001.01)

**Colorado Department of Public Health and Environment
REIMBURSEMENT INVOICE FORM**



COLORADO
Department of Public
Health & Environment

Invoice Period: 08/05/15 To 08/31/15

Invoice #: 082015 (EXT NEEDED)

FEIN: 846000804

PO/Encumbrance #: 0

Final Invoice: 0

Payment Option: 2 Mailed Reimbursement Check

Colorado Dept of Public Health
To: and Environment

CDPHE Program: 0

CDPHE Contact: 0

Mail Code: 0

Address: 4300 Cherry Creek Drive South

City: Denver

State: CO

Zip Code: 80246

Fax: 0

Telephone: 0

Email: 0

From: San Juan County

Contact Name: William A. Tookey

Address: PO Box 365

0

0

City: Silverton

State: CO

Zip Code: 81433

Fax: 970-387-5671

Telephone: 970-387-5766

Email: 0

Expenditure Categories	Total Amount Requested from CDPHE
Personal Services including Fringe Benefits	\$45,485.26
Supplies & Operating Expenses	\$16,768.55
Travel	\$1,574.58
Other Costs	\$0.00
Contractual (payments to third parties or entities)	\$44,172.62
SUB-TOTAL BEFORE INDIRECT	\$108,001.01
Indirect	\$0.00
TOTAL THIS INVOICE	\$108,001.01

To be Signed by Contractor/Vendor

I/We affirm the claimed expenses comply with the budget provisions of the contract and are reasonable and necessary, that all relevant progress or other reports have been filed, and all contract milestones and/or tasks related to the invoice period have been achieved.

Print Name, Title & Sign

Date

To be Signed by CDPHE Program Director or Delegate(s)

I/We affirm that I or my staff have reviewed the contractor / vendor's invoice and supporting documentation, if required, progress reports and other communications with the contractor/vendor, and believe to the best of my knowledge, that the contractor/vendor is in compliance with all contract provisions.

Print Name, Title & Sign

Date

To be Signed by CDPHE Fiscal Officer or Delegate(s)

I certify that the claimed expenses have been reviewed by me for compliance with the requirements of the funding source and the State of Colorado Fiscal Rules, and are charged to the appropriate funding source.

Print Name, Title & Sign

Date

Updated January 2015